

Set 2, Questions and Answers for ITB #09-X-2197809 Statistical/Actuarial Services  
October 21, 2008

	ITB Reference	Question
1	General	<p>For the services outlined in this ITB, is there a current vendor?</p> <p><b>The only portion of this ITB that was previously outsourced is the Physician's Upper Payment Limit program.</b></p> <p>Also, if yes, how much has been paid for these services by Alabama for the past two years.</p> <p><b>The Public Consulting Group was paid \$50,000.00 for this project.</b></p>
2	Section 4.0 General Overview	<p>Can Medicaid provide additional details regarding the anticipated services for the Pharmacy Program, Maternity Care Program, Program Integrity, and Together for Quality? How will prospective vendors be evaluated on their ability to provide services for these programs?</p> <p><b>Medicaid plans to implement a Pharmacy Medical Home program (official name forthcoming) in which pharmacists will be formally recognized for their cognitive and professional services. At the time of writing of this ITB the specific services for which pharmacies will be reimbursed have not been determined.</b></p> <p><b>This program should result in a cost savings to the Agency as well as improved outcomes for recipients. The contractor should be able to determine the amount of savings and a methodology to share a defined amount with providers. Historical claims data to be used for savings may include pharmacy, medical, and various claim types.</b></p> <p><b>The Pharmacy program may also require ad hoc queries; examples include but are not limited to 1) utilization and cost of specific drugs for a certain diagnosis code (such as asthma), 2) medical and pharmacy claims to determine cost shifting based on current or potential</b></p>

		<p>pharmacy edits, and/or 3) historical pharmacy claims data regarding specific patient populations, negating medical criteria, etc. Contractor should be able to provide requested reports and submit invoice for billable hours.</p> <p><i>For Together for Quality</i>, Contractor may be required to validate and create performance measures for certain disease states, apply program changes to determine cost savings (return on investment) and assist with implementation of a predictive modeling component.</p> <p>For Program Integrity, the contractor may be responsible for the analysis of Agency data and information to identify vulnerabilities and potential targets of specific provider types for detection of fraud, waste and abuse. The contractor may then be responsible for the development and application of algorithm(s) to provider –type specific claims data. The contractor may be responsible for determining cost avoidance/savings for Program Integrity.</p> <p>The Maternity Care program will be re-designed in 2009 to increase its effectiveness in decreasing the infant mortality rate in the state. Approximately 48% of all births in Alabama are funded by Medicaid. The Contractor may be responsible for data analysis to determine the effectiveness of initiatives in the re-designed program, along with determining a method to share any program savings.</p>
3	Section 4.2 Patient 1 <sup>st</sup> Program	<p>Please provide any documentation reports related to the savings distributed in April 2007 from the Patient 1<sup>st</sup> Program.</p> <p><b>This information was provided in Attachment D. Further documentation reports will be provided to the successful bidder.</b></p>
4	Section 4.2 Patient 1 <sup>st</sup> Program	<p>Does Medicaid currently give providers participating in the Patient 1<sup>st</sup> Program any financial incentives other than the shared savings, such as a per member per month payment for each beneficiary</p>

		<p>that they serve as their PMP?</p> <p><b>Yes. Currently, providers can choose whether or not to participate in 9 different case management components, each of which has a monetary value attached. These fees are paid to providers on a monthly basis with a potential total amount of \$2.60 per member per month with no cap.</b></p> <p><b>However, effective 1/1/09, the components comprising the fee will change from nine to four, only one of which is voluntary. In order to even participate, the provider will have to do three of the four thereby ensuring that all PMPs will receive a minimum case management fee of \$1.60. The optional component will be valued at \$1.00.</b></p>
5	Section 4.4 Key Personnel – Project Manager (page 39)	<p>Can the project manager for this contract also serve as the actuary?</p> <p><b>Yes, as long as the person meets the requirements of <u>both</u> positions, the project manager may also serve as the actuary.</b></p>
6	Section 4.4 Key Personnel – Account Statistician (page 39)	<p>Is it a requirement that the statistician work full-time at the Montgomery, Al Medicaid office? Would Medicaid allow the statistician to work off-site?</p> <p><b>No, the Account Statistician is required to complete the components identified in the BID and is not required to be a full-time position as long as required tasks are completed timely. The only personnel required to be onsite and fulltime is the staff statistician who must be located onsite at Medicaid.</b></p>
7	Section 4.4 Key Personnel – Staff Statistician (page 39)	<p>Are the resumes for the staff statistician(s) required with the vendor's response to this ITB?</p> <p><b>No, according to Section 4.4, page 39 states Contractor shall provide Medicaid with resume/CV of all key personnel with the exception of the staff statistician, for which Contractor shall submit an understanding to</b></p>

		<b>supply this resume/CV meeting the minimum requirements outlined below.</b>
8	Section 4.1 Physician Upper Payment Limit Program	<p>Please provide any documentation reports related to the Physician Upper Payment Limit Medicaid utilization projections.</p> <p><b>Please see attachment, “Final Report” from the Public Consulting Group. Other documentation will be provided to the successful bidder.</b></p>
9	Section 3.2 Statistical Support Unit	<p>Has the Statistical Support Unit historically used contract employees? Is the statistician currently under contract? If so, who is the vendor?</p> <p><b>No, all the staff members of the Unit are State employees.</b></p> <p><b>The Unit currently does not have a statistician on staff.</b></p>
10	General	<p>Will the state accept any modifications to the modifications to the standard contract terms?</p> <p><b>Section 1.15 does not allow bidders to place any qualification, exceptions, conditions, reservations, limitations, or substitutions in their bid concerning contract terms and conditions. Non-substantive clarifications or corrections to the ITB may be accomplished through the Contract Requirements Meeting (Section 2.4) or through contract amendment (Section 2.11).</b></p>